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ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY	
TELEPHONE NO. (Optional): FAX NO. (Optional):		
E-MAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):  SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
MUNICIPAL COURT,  JUDICIAL DISTRICT,		
COUNTY OF		
PEOPLE OF THE STATE OF CALIFORNIA		
vs.		
DEFENDANT:		
Date of birth:		
	CASE NUMBER(S):	
NOTICE OF APPEAL—MISDEMEANOR (DEFENDANT) (Penal Code, § 1466(2); Cal. Rules of Court, rule 182(a))		
(Penal Code, § 1400(2), Cal. Rules of Court, fulle 162(a))		
NOTICE		
Use this form if you were not charged with a felony and you were convicted		
(Penal Code, § 691(g).) If you were originally charged with a felony, use for		
You must file this form in the trial court within 30 days of the entry of judgments.	ent or appealable order.	
Defendant (name):  appeals from the order or judgment entered on (appeils) data of order judgment or centered.	anaa k	
appeals from the order or judgment entered on (specify date of order, judgment, or sente	ence):	
2. This appeal follows (check all boxes that apply):		
a. A final judgment of conviction (Penal Code, § 1466(2)(A)).		
b. An order made after judgment that affects a substantial right (Penal Code, § 146	66(2)(B)).	
c. Other (describe):		
3. Defendant's address: same as in attorney box above.		
as follows:		
Date:		
(TYPE OR PRINT NAME) (SIGN/	ATURE OF DEFENDANT OR ATTORNEY)	